1614

Docket No.: 025444.1132-US01

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Melton B. Affrime et al.

Application No.: 09/760,588

Filed: January 16, 2001

For: TREATING ALLERGIC AND

INFLAMMATORY CONDITIONS

Group Art Unit: 1614

Examiner: C. Delacroix-Muirheid

## TRANSMITTAL LETTER

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the abovereferenced Patent Application:

- 1. Fee Transmittal;
- 2. Petition for Extension of Time under 37 CFR 1.136(a) (in duplicate);
- 3. Amendment Transmittal Letter (in duplicate);
- 4. Amendment in Response to Non-Final Office Action;
- 5. Check No. 342568 for \$1,380.00 to cover:\$360.00 multiple dependent claims fee;\$1,020.00 three-month extension of time fee; and
- 6. Return receipt postcard.

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Docket No. 025444.1132-US01. A duplicate copy of this paper is enclosed.

It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: March 28, 2005

Respectfully submitted,

Natalie M. Derzko

Registration No.: 48,102 COVINGTON & BURLING

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Attorney for Applicants

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, toperson are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 09/760,588-Conf. #4299				
FEE TRANSMITTAL				Filing Date Janua		January 16, 20	nuary 16, 2001	
For FY 2005				First Named Inventor Melton B. Affrime				
	1 200	<u> </u>		Examiner Name C. Del		C. Delacroix-M	Delacroix-Muirheid_	
Applicant claims small	entity status.	See 37 CFR 1.27		Art Unit		1614		
TOTAL AMOUNT OF PAY	MENT	(\$) 1,380.00	0	Attorney Docket	Attorney Docket No. 025444.1132-US01			
METHOD OF PAYMEN	(check all	that apply)						
X Check Credit Card Money Order None Other (please identify):								
Deposit Account Depos	sit Account Nun	nber: 50-0740 De	eposit Acc	ount Name:		Covington & Bu	rling	
For the above-identi	fied deposit	account, the Di	rector is	hereby authorize	ed to: (che	ck all that apply)		
Charge fee(s)	indicated b	elow		Charge	e fee(s) ind	dicated below, ex	cept for th	e filing fee
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH	, AND EXA	MINATION FEE	S					
	FILI	NG FEES	SE	ARCH FEES	EXAMI	NATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		· · · · · · · · · · · · · · · · · · ·
Plant	200	100	300	150	160	80		·· · · · · · · · · · · · · · · · · · ·
Reissue	300	150	500	250	600	300		
Provisional Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (includi	•	•					50	25
Each independent claim over	er 3 (includi	ing Reissues)					200	100
Multiple dependent claims							360	180
Total Claims Extra C		Fee (\$)	Fee F	Paid (\$)		ultiple Depende		
58 =	x -	=		<del></del>			ee Paid (\$)	
Indep. Claims Extra (	Claime	Fee (\$)	Foo F	Paid (\$)	_30	<u> </u>	360.00	-
6 - 14 =	<u> </u>	=	1001	<u>αισ (Φ)</u>				
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = /50 (round <b>up</b> to a whole number) x =								
4. OTHER FEE(S)  Non English Specification \$120 for (no small entity discount)								
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00								
SUBMITTED BY								
Signature / //	III II	Amus		Registration No. (Attorney/Agent)	48,102	Telephone	(202) 662	2-6000
Name (Print/Type) Natalie M	. Derzko			Carried and and		Date	March 28	2005



## AMENDMENT TRANSMITTAL LETTER

Docket No. 025444.1132-US01

Application No.	Filing Date	Examiner	Art Unit
09/760,588-Conf. #4299	January 16, 2001	C. Delacroix-Muirheid	1614
<del></del>			

Applicant(s): Melton B. Affrime et al.

Invention: TREATING ALLERGIC AND INFLAMMATORY CONDITIONS

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

		CLAIM	S AS AMENI	DED	4
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	22	- 58 =		х	
Independent Claims	6	- 14 =		×	
Multiple Dependent Claims (check if applicable)					360.00
Other fee (please specify): Extension for response within third month					1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				1,380.00	

TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:	1,380.00	
x Large Entity Small Entity		
No additional fee is required for this amendment.		
Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed.	•	
X A check in the amount of \$1,380.00 to cover the filing fee is enclose	ed.	
Payment by credit card. Form PTO-2038 is attached.		
The Director is hereby authorized to charge and credit Deposit Account No. as described below. A duplicate copy of this sheet is enclosed.	50-0740	
x Credit any overpayment.		
x Charge any additional filing or application processing fees required under 37 (	CFR 1.16 and 1.17.	
Natalie M. Derzko Dated: M	larch 28, 2005	

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